

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

RECEIVED

2014 SEP 16 PM 3:42

Office Use Only MAIL CENTER

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Connolly, LLC iHealth Committee for Payment Integrity

ADDRESS (number and street)

50 Danbury Road

(Check if address is changed)

Wilton

CITY ▲

CT

STATE ▲

06897

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

PAC@Connolly.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 09 / 15 / 2014

3. FEC IDENTIFICATION NUMBER ► C

4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Curtis Cain

Signature of Treasurer

Date 09 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
CandidateCandidate
Party AffiliationOffice
Sought:

House

Senate

President

State

District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☒ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

- ☒ Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

☒ In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

14001-1020-27001

Write or Type Committee Name

Connolly, LLC iHealth Committee for Payment Integrity

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Connolly, LLC

Mailing Address

50 Danbury Road

Wilton

CITY

CT

STATE

06897

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Jonathan Olefson

Mailing Address

50 Danbury Road

Wilton

CITY

CT

STATE

06897

ZIP CODE

Custodian of Records

Telephone number

203

529

2000

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name
of Treasurer

Curtis Cain

Mailing Address

50 Danbury Road

Wilton

CITY

CT

STATE

06897

ZIP CODE

Title or Position

Treasurer

Telephone number

203

529

2000

14001-14002-2794

Full Name of
Designated
Agent

Adrienne Calderone

Mailing Address

50 Danbury Road

Wilton

CITY

CT

STATE

06897

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

203

529

2000

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wells Fargo, N.A.

Mailing Address

4 Corporate Drive

Suite 495

Shelton

CITY

CT

STATE

06484

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

1-4-1961 - 1-20-61

(8/2013)